

SEPTAGE HAULER PERMIT

Wellesley Health Department
90 Washington Street
Wellesley, MA 02482

Fee: \$50 per truck

Permit #:

Expiration: 3/31/

In accordance with M.G.L. c. 111, Section 31B and 310 CMR 15.402 (Title V) the undersigned makes application to the Board of Health for permission to remove and transport septage and the content of privies and cesspools as set forth below:

Name of Applicant:

Business Name:

Address:

Telephone #:

Fax #:

List number and types of equipment, their gallonage capacity, and date of vehicle inspection:
(add additional pages if needed)

Type of equipment	Gallonage capacity	Date of inspection

List areas where septage will be accepted from:

List all locations where septage will be disposed of (include a copy of the contract of the approval for use of the disposal location):

I certify that the information I have provided above is true and accurate. I recognize that it is a violation of this permit to dispose of septage anywhere other than the identified disposal locations or other approved of the Board in writing as an amendment to this permit

Date:

Signature:

Please note: Late fees apply